ISDH Annual Fiscal Report of a Nonprofit Acute Care Hospital

## **Hospital: Elkhart General Hospital**

Year: 2003 City: Elkhart Peer Group: Large

**Statement One: Summary of Revenue and Expenses** 

1. Gross Patient Service Revenue					
Inpatient Patient Service Revenue	\$211,911,903				
Outpatient Patient Service Revenue	\$146,548,082				
Total Gross Patient Service Revenue	\$358,459,985				
2. Deductions from R	evenue				
Contractual Allowances	\$157,288,892				
Other Deductions	\$4,448,504				
Total Deductions	\$161,737,396				
3. Total Operating R	evenue				
Net Patient Service Revenue	\$196,722,589				
Other Operating Revenue	\$8,580,858				

4. Operating Expenses				
Salaries and Wages	\$71,742,929			
Employee Benefits and Taxes	\$28,210,124			
Depreciation and Amortization	\$13,006,160			
Interest Expenses	\$2,685,971			
Bad Debt	\$9,886,880			
Other Expenses	\$75,621,604			
Total Operating Expenses	\$201,153,668			
5. Net Revenue and Exp	oenses			
Net Operating Revenue over Expenses	\$4,149,489			
Net Non-operating Gains over Losses	\$17,625,423			
Total Net Gain over Loss	\$21,774,912			

Total Operating Revenue	\$205,303,157

	6. Assets and Liabilities					
F	Total Assets	\$327,065,000				
F	Total Liabilities	\$121,664,000				

Statement Two: Contractual Allowances						
Revenue Source	Gross Patient Revenue	Contractual Allowances	Net Patient Service Revenue			
Medicare	\$152,540,053	\$94,321,217	\$58,218,836			
Medicaid	\$26,306,517	\$22,423,076	\$3,883,441			
Other State	\$0	\$0	\$0			
Local Government	\$0	\$0	\$0			
Commercial Insurance	\$179,613,415	\$40,544,599	\$139,068,816			
Total	\$358,459,985	\$157,288,892	\$201,171,093			

Statement Three: Unique Specialized Hospital Funds						
Estimated Incoming Revenue from Others	Estimated Outgoing Expenses to Others	Net Dollar Gain or Loss after Adjustment				
\$0	\$181,250	(\$181,250)				
	Estimated Incoming Revenue from Others	Estimated  Estimated Outgoing Revenue from Others Expenses to Others				

Educational	\$0	\$1,210,695	(\$1,210,695)
Research	\$0	\$0	\$0

Number of individuals estimated by this hospital that are involved	ed in education
Number of Medical Professionals Trained In This Hospital	0
Number of Hospital Patients Educated In This Hospital	15,000
Number of Citizens Exposed to Health Education Message	400,000

#### Statement Four Annual Summarized Community Benefit Statement on Nonprofit Hospital

This hospital is a nonprofit organization and files an annual community benefit statement with the Department under Indiana Code 16-21-9. Each nonprofit hospital must confirm its mission statement, document the number of persons and dollars allocated under its adopted charity care policy, and describe the progress of the community to achieve specific objectives set by the hospital.

County	Elkhart	Community	Elkhart County and surrounding Michiana areas.
Location		Served	

### **Hospital Mission Statement**

Caring for the sick and injured through high quality clinical and supportive services.

Unique Services		Type of Initiatives		Document Available	
Medical Research NO		Disease Detection	YES	Community Plan	YES

Professional Education	NO	Practitioner Education	NO	Annual Statement	NO
Community Education	VEC	Clinia Support	NO	Needs Assessment	1006
Community Education	1 ES	Chine Support	INO	Needs Assessment	1990

#### Allocation of Dollars and Persons Served under Adopted Charity Policy

Most nonprofit hospitals adopt a charity benefit policy to serve the medically indigent. On an annual basis, the hospital will confirm the eligibility and set aside dollars to ensure low-income persons can be offered needed inpatient and outpatient hospital services.

	2001	2002	2003
Persons served in last twelve months	802	1,429	1,245
Charity Care Allocation	(\$2,419,708)	(\$3,153,645)	(\$4,448,504)

#### **Hospital Community Benefit Projects and the Projects' Net Cost**

On an annual basis, all nonprofit hospitals will report on the progress that the local community has made in reducing the incidence of disease and improving the delivery of health services in the community.

Name of Program and Description of Progress Made in Achieving Annual Objectives	Net Costs of Programs
Community Benefit Program	(\$417,552)
On Billed Services	(\$1,592,068)
Low/Negative Margin Services	(\$375,650)

Summary of Unreimbursed Costs of Charity Care, Government

#### **Funded Programs, and Community Benefits**

Based on uniform definitions of costs, each nonprofit hospital must identify the costs of serving its community that are not reimbursed by government and other third party payers.

Specialized Programs	Unreimbursed Costs
1. Total unreimbursed costs of providing care to patients	(\$2,340,313)
unable to pay, to patients covered under government funded programs, and for medical education, training.	
2. Community Health Education	(\$901,295)
3. Community Programs and Services	(\$993,325)
4. Other Unreimbursed Costs	\$0
5. Total Costs of Providing Community Benefits	(\$4,234,933)

#### **Identification of Additional Non-Hospital Charity Costs**

In addition, some hospitals will have non-hospital organizations under its ISDH license are providing community benefits in this fiscal year.

Organization Providing Charity Care	Net Costs of Care
None	\$0

For further information on these initiatives, contact:

Hospital Representative: Renee Keck

Telephone number: 574/523-3439

Web Address Information: www.egh.org

# ISDH STATISTICAL COMPARISON BETWEEN THIS HOSPITAL AND OTHER HOSPITALS IN ITS PEER GROUP

PERFORMANCE INDICATOR	METHODOLOGY	THIS HOSPITAL'S RESULTS	PEER GROUP AVERAGE
1. # of FTE's	Number of Full Time Equivalents	1,072	2,212
2. % of Salary	Salary Expenses divided by Total Expenses	35.7%	37.8%
3. Average Daily Census	Patient Days divided by annual days (365 days)	163.6	237.6
4. Average Length of Stay	Number of Patient Days divided by the Number of Discharges	4.9	5.1
5. Price for Medical/Surgical per stay	Total Medical/Surgical charges divided by Medical/Surgical discharges	\$5,464	\$3,042
6. Gross Price per Discharge	Gross Inpatient Revenue divided by the Total Discharges	\$17,401	\$17,323
7. Outpatient Revenue Percentage	Outpatient Revenue divided by the Gross Total Revenue	40.9%	40.9%

8. Gross Price per Visit	Gross Outpatient Revenue divided by the Total Outpatient Visits	\$830	\$1,022
9. % of Medicare	Medicare Revenue divided by the Gross Patient Revenue	42.6%	37.8%
10. % of Bad Debt	Bad Debt Expense divided by the Gross Operating Expenses	4.9%	4.9%
11. Charity Allocation	Unreimbursed costs of providing services to patients under adopted charity policy	(\$2,340,311)	(\$10,021,313)
12. Net Margin	Excess of Revenue over Expenses divided by the Total Operating Revenue	2.0	4.3

#### Notes:

- 1. NR = Not Reported
- 2. See Statewide Results for definitions of terms.